

Application No.	Applicant(s)	
09/937,632	BURKETT, DOUGL	AS D.
Examiner	Art Unit	
Deborah C Lambkin	1626	

		IS	SUE CL	ASSIFICA	TION								
	ORIGINAL		CROSS REFERENCE(S)										
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)										
424	9.7	424	98										
· · · · · · · · · · · · · · · · · · ·	NAL CLASSIFICATION	544	37										
A 6 11	8 10 100												
C072	279118												
	1												
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	1												
(Assi	stant Examiner) (Dal	e)		ORAH C. LAMBI MARY EXAMINE	Total Claims Allowed: 5								
	struments Examiner)			C Lamble y Examiner)	O.G. Print Claim(s	O.G. Print Fig.							
Claims	Claims renumbered in the same order as presented by applicant   CPA												

	Claims renumbered in the same order as presented by applicant							☐ CPA			☐ T.D.			☐ R.1.47					
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original
1	1	1		31			61			91			121			151			181
	2	1		32			62			92			122			152			182
	3	1		33			63			93			123			153			183
	4			34			64			94			124			154			184
2	5	]		35			65			95			125			155			185
3	6			36			66			96			126			156			186
4	7			37			67			97			127			157			187
5	8			38			68			98			128			158		:	188
	9			39			69			99			129			159			189
	10			40			70			100			130			160			190
	11			41			71			101			131			161			191
	12			42			72			102			132			162			192
	13			43			73	]		103	,		133			163			193
	14			44			74	]		104			134			164			194
	15			45			75	]		105			135			165			195
	16			46			76			106			136			166			196
	17			47			77			107			137			167			197
	18			48			78			108			138			168			198
	19			49			79	]		109			139			169			199
	20			50			80			110			140			170			200
	21			51			81			111			141	!		171			201
	22			52			82			112			142			172			202
	23			53			83	]		113			143			173			203
	24			54			84			114			144			174			204
	25			55			85			115			145			175			205
	26			56			86			116			146			176			206
	27			57			87			117			147			177			207
	28			58	1		88			118			148			178			208
	29			59	]		89	]		119			149			179			209
	30	<u> </u>		60			90	<u> </u>	L	120			150			180			210